

EXAM REGISTRATION PROCESS



HOW DO I REGISTER FOR AN EXAM




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COURSE COMPLETION & REGISTRATION EMAIL

ONCE THE STUDENT IS PASSED IN THE APPROVE COURSE AN EMAIL TO COMPLETE THE APPLICANT STATEMENT WILL BE SENT

Students + Add 👁 Show All

| Name | Graded Date | State Exam | Tries | Skill Date | Status | |
|------------|-------------|------------|-------|------------|--------|---|
| [REDACTED] | 04/20/2018 | | 0 | 04/20/2018 | Passed | 🔑 |
| | 04/23/2018 | | 0 | 04/23/2018 | Passed | 🔑 |
| | 04/20/2018 | | 0 | 04/20/2018 | Passed | 🔑 |
| | 05/01/2018 | | 0 | 05/01/2018 | Passed | 🔑 |
| | 04/24/2018 | | 0 | 04/24/2018 | Passed | 🔑 |
| [REDACTED] | 04/19/2018 | | | | | |
| | 04/23/2018 | | | | | |
| | 05/06/2018 | | | | | |
| [REDACTED] | 04/23/2018 | | | | | |



Sun 5/6/2018 7:14 AM

Continuum <noreply_emspic@emspic.org>

EMS Course Completion Notification: 0100043

To: continuum-test@emspic.org

To proceed with scheduling an exam, please use this [link](#) to complete the Applicant Statement from your Continuum dashboard.

The EMSPIC Continuum Team

<https://testcontinuum.emspic.org>

Please do not reply to this email as this email address is not monitored. If you require further assistance, contact the EMSPIC help desk at (919) 843-0201.



WHAT IF I DON'T RECEIVE A REGISTRATION EMAIL?

- In the event the student did not receive a course completion and registration email
- The student will need to access their profile in Continuum
- Once on their profile, the student will need to scroll down to “Castle Exams”
- Once at the “Castle Exams” section, the student may click on the “Register” button
- By clicking on the register button, the student will begin the registration process

Courses

Find a course ^

| Course | Start Date | End Date | Level | Result | State |
|---|------------|------------|------------------------------|--------|-------|
| Initial Emergency Medical Technician (109431) | 09/06/2017 | 12/22/2017 | Emergency Medical Technician | Passed | NC |

Exams

Find an exam ^

Nothing found to display.

Castle Exams

Register ^

Nothing found to display.



NO REGISTRATION EMAIL

Courses

[Find a course](#)

| Course | Start Date | End Date | Level | Result | State |
|---|------------|------------|------------------------------|--------|-------|
| Initial Emergency Medical Technician (109431) | 09/06/2017 | 12/22/2017 | Emergency Medical Technician | Passed | NC |

Exams

[Find an exam](#)

Nothing found to display.

Castle Exams

[+ Register](#)

Nothing found to display.

APPLICANT STATEMENT

ALL STUDENTS MUST COMPLETE AN APPLICANT STATEMENT TO MOVE TO SCANTRON'S EXAM REGISTRATION



NORTH CAROLINA DIVISION OF HEALTH SERVICE REGULATION

Office of Emergency Medical Services

Applicant Statement

| | |
|--------------------------|---|
| Exam Code:* | <input type="text"/> |
| LAST NAME:* | <input type="text" value="USER"/> |
| FIRST NAME:* | <input type="text" value="TESTBANK"/> |
| MIDDLE NAME: | <input type="text"/> |
| P-NUMBER:* | <input type="text" value="P003562"/> |
| PHONE NUMBER:* | <input type="text" value="5555555555"/> |
| SOCIAL SECURITY NUMBER:* | <input type="text" value="0001"/> |

1.* Have you, under this or any other name, EVER been arrested, charged, convicted of, pled guilty or no contest to, or received a deferred sentence for a misdemeanor or felony in this or any other state or nation, or while serving in the Armed Forces? If yes, list offenses, including year and verdict, below. Please list all aliases including maiden name used.

- ☐ Yes
☐ No

NOTE: Please be reminded that any citations, arrests, charges, convictions, dealing with misdemeanors or felonies that have been dismissed are still in a pending status should



Applicant statement must be completed prior to authorization is granted:

- All sections must be completed
- Must be electronically signed



APPLICANT STATEMENT COMPLETED

ONCE THE APPLICANT STATEMENT IS COMPLETED, CONTINUUM WILL DISPLAY A GREEN BANNER STATING, “AN EMAIL FROM SCANTRON WILL BE SENT TO YOU WITH STEPS TO COMPLETE REGISTRATION.”

An email from **Scantron** was sent to you with steps to complete registration.

User Profile: John Doe P000001

Primary Information

Email (User ID):noname@yahoo.com

SSN: ### - ## - 0001

Birthday: 01/01/1979

Mailing Address:
100 Main Drive
Burlington, NC 27217
Alamance County

Phone Numbers

Home: (555) 555-5555

Demographics

Gender: Male

Race: White

Status: Active

State Profiles

| State User ID | State |
|---------------|-------|
| P000001 | NC |

Credentials

Nothing found to display.



APPLICANT STATEMENT COMPLETED

ONCE THE APPLICANT STATEMENT IS COMPLETED, CONTINUUM WILL REFLECT SCANTRON EXAM REGISTRATION

Exams

Find an exam

Nothing found to display.

Castle Exams

Register

| Applicant Statement Status | Level | Results |
|----------------------------|------------------------------|---------|
| Complete | Emergency Medical Technician | |



NOTICE TO SCHEDULE

☐ ONCE APPLICANT STATEMENT IS SUBMITTED

- ☐ Scantron sends the candidate a notice to schedule

- ☐ This email will come from scantron.com or candidatesupportservices@scantron.com

- ☐ Usually received in 10-15 mins

- ☐ If not received

- ☐ Check Junk, Promotions, Spam, and Trash folders

- ☐ Especially for Gmail and Yahoo

☐ THE NOTICE TO SCHEDULE INCLUDES

- ☐ URL for scheduling system

- ☐ Username and password for logging into the scheduling system



1

2

3

4

5

File

Message

Help

Tell me what you want to do

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Junk

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Reply All

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More

Education

Team Email

Reply & Delete

To Manager

Done

Create New

Move

Rules

OneNote

Actions

Mark Unread

Categorize

Follow Up

Translate

Find

Related

Select

Read Aloud

Zoom

Quick Steps

Move

Tags

Editing

Speech

Zoom

EB

[Redacted]

Messer, Michael T

8/19/2019

[External] Fwd: Notice to Schedule NCOEMS

You replied to this message on 8/20/2019 12:37 PM.
If there are problems with how this message is displayed, click here to view it in a web browser.
Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.

Notice to Schedule Examination

To: [Redacted]

You are now ready to schedule your **Emergency Medical Technician (EMT)** examination. The scheduling website is listed below. Be sure to complete all the information required when scheduling. You will receive confirmation of your examination date and site by email.

If you have any questions regarding your registration, please contact Scantron at (919) 572-6880.

SCHEDULING WEBSITE

Link: [Redacted]
Username: [Redacted]
Password: 67mbgmwe
(Note: The password above is for scheduling only and is not the password needed to access your test(s) at the testing center.)

The exam registration fee is \$68. The registration fee must be paid online by credit card or voucher while submitting your scheduling request.

You must schedule at least four (4) business days prior to the date you wish to test, unless you have been pre-approved for reasonable accommodations (please see section below.)

IMPORTANT ADDITIONAL INFORMATION

Eligibility

Your eligibility is valid for a period of 90 days from the date your Notice to Schedule was initially sent. If you do not schedule your exam within your eligibility period, you will no longer be able to schedule your exam and you will need to contact North Carolina OEMS office for further information. Email reminders will be sent to eligible candidates who have not yet completed exam scheduling.

Notes

Testing centers are subject to change without notice, and testing centers maintain individual dates and times of operations. Testing appointments are made on a first come, first served basis.

Rescheduling

Please note that *rescheduling* refers to a process that occurs once you have scheduled a testing date and subsequently wish to change or amend the date, time or location of your scheduled exam. You may reschedule a testing appointment up to four (4) business days in advance of your testing appointment. Reschedule requests are not accepted within four (4) business days of your scheduled testing appointment. To reschedule your exam, click on the scheduling link above to log back into the scheduling system with the provided username and password. Once you have logged in, click on the link to reschedule. A \$35 non-refundable fee will apply to all rescheduled exams; the fee must be paid online at the time of the request.

Identification

You are required to present a valid, government-issued photo ID (e.g., driver's license, passport, state-issued ID card) on exam day; please ensure that your first and last name on the valid, government-issued photo ID EXACTLY match your first and last name as they appear on the scheduling screens. If your first and last names are incorrect, please contact North Carolina OEMS immediately at (919) 855-3935. If you have more than one last name listed on your government-issued ID, the same last names must be reflected on your confirmation email.

Reasonable Accommodations

If you have been granted reasonable testing accommodations, you must submit your scheduling request **at least seven (7) business days prior to the date** you wish to test. This is to allow time to confirm your accommodations. Your scheduling request should not be considered final until you receive your official Scheduling Confirmation Notice. It may take a few days to confirm the accommodations with the test site. You will be contacted by Scantron via email within 3 business days of submitting your scheduling request, either with the Scheduling Confirmation Notice to confirm your requested appointment time or with other scheduling options.

Cancellation Policy

If you wish to cancel your appointment and terminate your eligibility, you must first cancel the testing session at least four (4) business days in advance of the testing appointment. Cancellation requests are not accepted within four (4) business days of your scheduled testing appointment. To cancel your exam, click on the scheduling link above to log back into the scheduling system with the username and password provided above. Once you have logged in, click on the link to cancel. A \$35 fee will apply to all cancellations; the fee must be paid online at the time of the request.

OFFICE of EMS



Welcome to the Castle Online Exam Registration System

Enter your username and password to submit your scheduling request.

te: If you have been granted reasonable testing accommodations, your scheduling request should not be considered final until
ing Confirmation Notice. It may take a few days to confirm the accommodations with the test site. You will be contacted by C
days of submitting your scheduling request, either with the Scheduling Confirmation Notice to confirm your requested appoi
scheduling options.

Username:

Password:



Examination Registration

[Examination Name]

ABOUT YOU

Name*:

Street Address*:

City*: State/Province*: Postal Code*:

Country*: Email*:

Home phone*: Work phone: Mobile phone:

CHOOSE A SITE

Exam Scheduling Instructions

If the values in the boxes to the right are not where you desire to test:

1. Select desired country from the box at the right
2. Select desired state (required for U.S. only)
3. Click "Get Locations" button, wait for the page to reload, and then select you site and date from the boxes below.

Country:

State:

Testing Site and Date

1 Select Site

Location*:

EXAM SCHEDULING

- ☐ Once you are eligible for testing you will receive a notice to schedule testing by email. This will provide a unique username and password, as well as directions on how to schedule a testing session through Scantron online test scheduling system.
- ☐ Candidates can select a Castle test site by geographic location
- ☐ All domestic test sites available (not limited to North Carolina)



SELECTING A LOCATION

Next, the system will assist you in selecting an available testing session by test site location and test date. You will then pay the testing session fee of \$68 via secure ecommerce (credit card).

https://castleworldwide.com/tds_v5/registra Castle Worldwi... Online Registration Demog...

Exam Scheduling Instructions

If the values selected in the boxes to the right are not where you desire to test -

- Step 1 - Select desired country from the box to the right
- Step 2 - Select desired state(s) from the box to the right (required for US only)
- Step 3 - Click the "Get Locations" button, wait for the page to reload and then select your site and date from the boxes below

Country: US
State/Province 1: NC
State/Province 2: Select a state/province
Get Locations

Testing Site Location: *
Address:
Date/Time: *

Please select a location
NC, BOONE - APPALACHIAN STATE UNIVERSITY TESTING SERVICES
NC, CARY - NC ELITE CAREER SERVICE CENTER
NC, CHARLOTTE - BCY HEALTHCARE, INC.
NC, CHARLOTTE - NC ELITE CAREER SERVICE CENTER OF CHARLOTTE
NC, CULLOWHEE - WESTERN CAROLINA UNIVERSITY
NC, FAYETTEVILLE - FAYETTEVILLE STATE UNIVERSITY
NC, GREENSBORO - NC ELITE CAREER CENTER OF GREENSBORO
NC, MORRISVILLE - CASTLE WORLDWIDE TEST
NC, RALEIGH - HSB ENTERPRISE CORPORATION
NC, WILMINGTON - NC ELITE CAREER SERVICE CENTER-WILMINGTON
NC, WINSTON SALEM - ALLIANCE ASSESSMENTS

Please Note: These tools are informational only. Castle assumes no responsibility for any loss or delay resulting from such use.

Testing Site Location: *
Address:
Date/Time: * Please select a location first

PLEASE NOTE: You will receive your second choice ONLY if your first choice is not available. Once you receive your confirmation notice, your choice is final, and rescheduling will be subject to the rescheduling deadline and fee.

Scroll down to the bottom of the screen and click "Submit" after choosing your test dates. If you do not see a screen confirming that your scheduling request has been submitted, please call Castle Worldwide at 919-572-6880.

ADA Request

If you require reasonable administration conditions in accordance with the Americans with Disabilities Act, please call Castle Worldwide, Inc. at (919) 572-6880.

Note: Once you click submit, you will not be able to change your registration without paying a cancellation/re-fee.

Submit

NORTH CAROLINA
EMS
OFFICE of EMS

→ https://castleworldwide.com tds_v5/registra Castle Worldwi... Online Registration Demog...

Exam Scheduling Instructions

If the values selected in the boxes to the right are not where you desire to test -

- Step 1 - Select desired country from the box to the right
- Step 2 - Select desired state(s) from the box to the right (required for US only)
- Step 3 - Click the "Get Locations" button, wait for the page to reload and then select your site and date from the boxes below

Country:

State/Province 1:

State/Province 2:

Testing Site and Date - 1st Preference

Location: *

Address:

Date/Time: *

Please select an exam date

07/08/2015 10:00 AM Wednesday

07/09/2015 10:00 AM Thursday

07/10/2015 10:00 AM Friday

07/10/2015 01:30 PM Friday

07/13/2015 10:00 AM Monday

07/13/2015 01:30 PM Monday

07/15/2015 10:00 AM Wednesday

07/16/2015 10:00 AM Thursday

07/20/2015 10:00 AM Monday

07/20/2015 01:30 PM Monday

07/21/2015 10:30 AM Tuesday

07/22/2015 10:00 AM Wednesday

07/23/2015 10:00 AM Thursday

07/24/2015 10:00 AM Friday

07/24/2015 01:30 PM Friday

07/27/2015 10:00 AM Monday

07/27/2015 01:30 PM Monday

07/29/2015 10:00 AM Wednesday

07/30/2015 10:00 AM Thursday

07/31/2015 10:00 AM Friday

07/31/2015 01:30 PM Friday

08/01/2015 09:30 AM Saturday

08/03/2015 10:00 AM Monday

08/03/2015 01:30 PM Monday

08/07/2015 11:00 AM Friday

08/07/2015 01:30 PM Friday

08/08/2015 11:00 AM Saturday

08/10/2015 10:00 AM Monday

08/10/2015 01:30 PM Monday

[View Google Map](#) [Zip Code search](#)

Please Note: These tools are informational only. Castle assumes no responsibility for any delay resulting from such use.

PLEASE NO confirmation

Testing Site:

Location: *

Address:

Date/Time: *

Scroll down to

ADA Request

If you require accommodations in accordance with the Americans with Disabilities Act, please call Castle Worldwide, Inc. at (919) 572-6880.

Note: Once you have submitted your registration, you will not be able to change your registration without paying a cancellation/rescheduling fee.

SELECTING AVAILABLE TIME

YOU MUST SUBMIT YOUR TEST SCHEDULING REQUEST AT LEAST FOUR(4) DAYS PRIOR TO YOUR PREFERRED TEST DATE, AND YOUR TESTING SESSION MUST BE SCHEDULED WITHIN YOUR 90-DAY ELIGIBILITY PERIOD.



Castle Worldwide SCHEDULING CONFIRMATION NOTICE (Admission Ticket)

Date: Mar 02, 2015
To: Demo Test
From: Castle Worldwide, Inc.

Please note: this notice is more than one page. You must print all pages and bring them with you to the testing appointment.

We have confirmed the following examination request:

| | |
|-------------------------------------|---|
| Your test(s) is/are: | DEMO EXAMINATION |
| Your testing date is: | Apr 06, 2015 |
| Your assigned test site is: | CASTLE WORLDWIDE TEST |
| Your assigned test site address is: | 900 PERIMETER PARK DRIVE SUITE #G MORRISVILLE, NC 275603 |
| Your reporting location is: | 900 PERIMETER PARK DRIVE SUITE #G |
| Your Exam Password is: | 86950349 |
| Your reporting time is: | 08:45 AM |
| Exam Duration: | 4 hours |
| Map: | Google Map |

Please Note: The map and/or directions above are informational only. Castle Worldwide, Inc. and the exam sponsor assume no responsibility for any loss or delay resulting from such use.

Parking facilities may vary per exam site. Arrive early to allow time to park.

To view a demonstration of the online test delivery system, please [view this free sample test](#). Please note: the content of the sample examination does not include content from the actual examination.

For security purposes, you may not keep this confirmation notice with you while you are testing. If you would like this notice back at the conclusion of your testing session, please notify the proctor before you begin your exam.

TO BE ADMITTED TO THE EXAMINATION YOU MUST:

- Submit this **CONFIRMATION NOTICE** to the proctor.
- Bring a **current, government-issued photo identification with signature** (Driver's license, immigration card, passport, State ID card, or military ID card). **You will NOT be admitted without proper identification.**
- Original documents are required.
- Your first and last name on this notice must match the first and last name on your identification **exactly**.
- Nicknames are not acceptable.
- If you have more than one last name listed on your government-issued photo ID, the same last names must be reflected on the confirmation email.
- If you have a hyphenated last name, it must be hyphenated on both the identification and on this notice in order to be admitted. Presenting name change documentation (marriage license, etc) at the testing center is

[Additional information included in the Confirmation email not shown here due to length]

EMAIL CONFIRMATION

Upon submission and payment of the testing fee, Castle will send you an email confirmation notice which will include the test location, test date, and reporting time for your testing session, as well as a list of items that you should and should not bring to the testing center.

•You must print the confirmation notice and bring it to the testing center on your test date. With a current photo identification that includes your signature.

•For information regarding cancellation of exam, please see the companion document "NCOEMS Computer-based Test Administration".

